03-15-01

PTO/SB/05 (11-00) Approved

use through 10/31/2002. OMB 0651-0032

Please type a plus sign (+) inside this box



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

## UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No.		FUJA 18.463				
		N. KAJIZAKI				

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

(Only for new nonprovisional	applications	under 37 CFR 1.53(b)	)	ress Maii Lad	91 140.	.0227	7201	300 PC		
APPLICATION ELEMENTS				ADDRESS TO: Assistant Commissioner for Patents Box Patent Application						
See MPEP chapter 600 concer	ning utility p	atent application conte	nts.		Was	hington, l	DC 202	231		
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)				CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
Applicant claims small entity status.				B. Nucleotide and/				ubmission		
2. See 37 CFR 1.27.				if applicable, a)						
Specification [Total Pages 22]				a Compu	ter Readable	e Form (0	CRF)			
(preferred arrangement ser for the low)				٠. ــــــ ٠		•				
Descriptive title of the invention     Cross Reference to Related Applications				b. Specification Sequence Listing on:						
- Statement Regard				i. 🔲	CD-ROM or	CD-R (2	copies	s); or		
- Reference to sequ				i i. 🔲	paper					
or a computer pro - Background of the		appendix		c. Statem	ents verifyin	a identity	of abo	ove copies		
- Background of the		n		<u> </u>						
- Brief Description of	of the Drawir			ACCOMP						
- Detailed Descripti	on			9. X Assignr	nent Papers	(cover sl	neet &	document(s))		
- Claim(s)				40 37 CFF	3.73(b) Sta	tement	X	Power of		
- Abstract of the Di	sciosure		7	·	here is an a	• ,		J Attorney		
4. X Drawing(s) (35 U.S.	C 113) [	Total Sheets 27	1	11. English	Translation	Docume	nt <i>(if a</i>	pplicable)		
· · · · <del>- ·</del>		4	i .	12. Informa	ation Disclos	ure		Copies of IDS		
5. Oath or Declaration	[	Total Pages 4	] ]	Statem	ent (IDS)/PT	O-1449		J Citations		
a. X Newly execute	ed (original o	r copy)		13. Prelimi	nary Amend	ment				
Copy from a pr	rior application	on (37 CFR 1.63 (d))	_	D + D						
b. [] (for continuatio	n/divisional	with Box 18 completed	)	(Should be specifically itemized)						
	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)				15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
		ion, see 37 CFR		Request and Certification under 35 U.S.C. 122						
1.63(d)(2) an				(b)(2)(B)(i). Applicant must attach form PTO/SB/35						
				or its e	quivalent.					
6 Application Data Si	heet. See 37	CFR 1.76		17 Other:			· · · · · · · · · · · · · · · · · · ·			
18. If a CONTINUING APPLICA	ATION, chec	k appropriate box, and	supply t	e requisite inform	ation below a	and in a p	relimir	nary amendment,		
or in an Application Data Sheet	t under 37 C	FR 1.76:								
Continuation	Divisional	Continuation-in-part (	(CIP)	of prior applicat	on No.:					
Prior application information:	Examiner		_	Group Art Uni	t					
For CONTINUATION OR DIVISION	NAL APPS on	ly: The entire disclosure	of the pr	r application, from	which an oa	th or decl	aration	is supplied under		
Box 5b, is considered a part of the	he disclosure	of the accompanying co	ontinuatio	or divisional appli	cation and is	hereby in	corpor	ated by reference.		
The incorporation can only be re	ii <del>u</del> a upon wh	en a portion has been in			seeminted app	uuu0ii j				
				ADDRESS						
Customer Number or Bar Code	a Label	0263			or	Correspon	dence ac	idress below		
Customar Number of Dar Otto		(insert Customer No. or Att	ach bar cod	label here)		<u> </u>				
Name										
Address	<u> </u>									
City	-		St	te		Zip (	Code			
Country		· · · · · · · · · · · · · · · · · · ·	Teleph			Fa	ex .			
	<del></del>		· Oloph							
Name (Print/Type)	\aron∕B.	Karas 🕜		Registration N	o. (Attorne)	/Agent)	18.9	923		
71ao (1 1 1) poy	<del>-/-/-</del>	19-7			Ť		3	4/01		
Signature	( RA	cou Ell	-	las	-	Date	J/ 14	<del>1</del> /U I		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Westpicaton, DC 20231. Washington, DC 20231.

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Complete if Known

## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** 

(\$) 750.00

spond to a collection of information	Uniess it displays a valid Olyb Control Bullio	e.				
Complete if Known						
Application Number						
Filing Date						
First Named Inventor	N. KAJIZAKI					
Examiner Name						
Group Art Unit						
Attorney Docket No.	FUJA 18.463					

METHOD OF PAYMENT FEE CALCULATION (∞ntinued)					
1. X  The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES				
Deposit Deposit	Large				
Account Number 08-1634	Entit	Fee Fee	y Fee Description	Fee Paid	
Deposit Account Helfgott & Karas, P.C.	Code (\$) 105 130	Code (\$) 205 65	Surcharge - late filing fee or oath		
Name Incligate & Raras, 1.C.	127 50	227 25	Surcharge - late provisional filing fee or		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50	221 25	cover sheet		
Applicant claims small entity status.	139 130	139 130	Non-English specification		
See 37 CFR 1.27  2. X Payment Enclosed:	147 2,520	147 2,520	For filing a request for ex parte reexamination		
Check Credit card Money Cothor	112 920*	112 920°	Requesting publication of SIR prior to Examiner action		
FEE CALCULATION	113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action		
1. BASIC FILING FEE	115 110	215 55	Extension for reply within first month		
1. BASIC FILING FEE Large Entity Small Entity	116 390	216 195	Extension for reply within second month		
Fee Fee Fee Fee Description	117 890	217 445	Extension for reply within third month	<u> </u>	
Code (\$) Code (\$)	118 1,390	218 695	Extension for reply within fourth month	<u> </u>	
101 710 201 355 Utility filing fee 710	128 1,890	228 945	Extension for reply within fifth month		
106 320 206 160 Design filing fee	119 310	219 155	Notice of Appeal	<u> </u>	
108 710 208 355 Reissue filing fee	120 310	220 155	Filing a brief in support of an appeal		
114 150 214 75 Provisional filing fee	121 270	221 135	Request for oral hearing	<u> </u>	
	138 1,510	138 1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 710	140 110	240 55	Petition to revive - unavoidable	<b> </b>	
2. EXTRA CLAIM FEES	141 1,240	241 620	Petition to revive - unintentional	<b></b>	
Fee from Extra Claims below Fee Paid	142 1,240	242 620	Utility issue fee (or reissue)		
Total Claims 12.00 -20** = X 18.00 = 0	143 440	243 220	Design issue fee	<del></del>	
Independent 2.00 - 3** = X 80.00 = 0	144 600	244 300	Plant issue fee		
Multiple Dependent	122 130	122 130	Petitions to the Commissioner		
	123 50	123 50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180	126 180	Submission of Information Disclosure Stmt	<u> </u>	
Code (\$) Code (\$)	581 40	581 40	Recording each patent assignment per property (times number of properties)	40	
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3	146 710	246 355	Filing a submission after final rejection		
104 270 204 135 Multiple dependent claim, if not paid			(37 ČFR § 1.129(a))	L	
109 80 209 40 ** Reissue independent claims over original patent	149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))		
	179 710	279 355	Request for Continued Examination (RCE)		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169 900	169 900	Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 0	Other fee (specify)				
SUBTOTAL (2) (3) U	1				
**or number previously paid, if greater, For Reissues, see above	*Reduced b	y Basic Filing	Fee Paid SUBTOTAL (3) (\$) 40		

SUBMITTED BY		Complete (if a	Complete (if applicable)		
Name (Print/Type)	Aaron B. Karas	Registration No. (Attorievi Agent)	18,923	Telephone	212-643-5000
Signature	(sarou)	Mar	a.	Date	3/14/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.